April Bailey Indiana State Department of Health May 19-20, 2010

## **School Based Clinics**

## Learning Objectives

- Understand how to plan a school based immunization clinic.
- Identify potential barriers to working with schools and ways to overcome barriers.
- Know how to plan basic clinic logistics and vaccine management at off site locations.

### Overview of presentation

- Planning a School Based Clinic
- Preparing for a School Based Clinic
- Implementing a School Based Clinic
- Evaluating the Clinic

#### Why School Based clinics?

- Benefits
  - Children already at school, no extra travel required
- Barriers
  - Schools not wanting to host
  - School may require parent to be present
- Determining the need for mass vaccination clinics

## My Clinic Mantra:

# Shots in arms

# **Getting Started**

Planning a Mass Vaccination Clinic

#### Partnering with the School District

- Role of the School Nurse
- Planning Partners
- Overcoming Barriers with the School

# Marketing the Clinic to School Administration

- Present the program as a means to decrease absenteeism due to vaccine preventable disease
- Market the program as a no cost incentive
- Present as a method to prevent school-based outbreaks
- Role in the health of their students
- Will assist in bringing the school into compliance with Indiana school law requirements
- Present the program as a benefit and not a burden upon the school
  - i.e. local health department staff will be brought in

## Scheduling the Clinic

- Who: Clearly define who the target audience is for the clinic
- What: Define which vaccine(s) will be provided
- When: Set a date and time
- Where: Determine a location
- How: Make a plan for how the clinic will operate

## **Scheduling Considerations**

- During school vs. After school
- Do parents need to be present?
- Other school events

# **Getting Ready**

Preparing for a Mass Vaccination Clinic

#### **Clinic Timeline**

- Set clinic date
- Order the vaccine and supplies
- Print consent forms with VISs
- Send out consent forms to parents

#### **Parent Mailing**

- Notify of clinic date/times and reason for clinic (i.e. new school requirements)
- Consent Form
  - VFC Eligibility Screening included on consent form
- Health Screening Questionnaire
- VIS for each vaccine offered
- If possible, include current immunization record for student

## Sending Out Parent Mailing

- School Nurse will know best method for reaching parents
- Email vs. Print
- Post to school website

#### Returning Consent Forms

- School Nurse prior to clinic
  - Review and verify which vaccines are needed before the clinic
  - Better idea of how many participants
- Bring to clinic
  - During clinic will need to verify who needs which vaccines
  - Unsure what clinic demand will be

#### **Clinic Supplies**

- Ancillary supplies
  - Needles/syringes, band aids, alcohol pads etc
- Office supplies
  - Pens, clipboards, highlighters, stapler etc
- Emergency medical kit
  - Epi Pen, Benadryl, blood pressure cuff, smelling salts etc

## Ordering the Vaccine

- Place order for public stock vaccine with ISDH
  - Note order for school clinic
  - No prior approval needed for school clinic orders
- Public stock vaccine use
  - 2009-2010 ARRA funding
  - Future clinics

## **Clinic Logistics**

- Vaccine transport and storage on-site
- Traffic flow
- Vaccine stations
- Staff needed

# Ready, Set, Go

Implementing a Mass Vaccination Clinic

### Vaccine Transport

- Refrigerated vaccines
  - Use insulated containers to transport
  - Cold packs
  - Bubble wrap barrier
- Frozen vaccines
  - Varicella transport cooler
  - Dry ice

### Vaccine Storage On-Site

- Refrigerated vaccines
  - Keep in insulated containers at correct temperatures throughout clinic
  - If possible, small coolers can be used at each station
  - Do not allow vaccine to sit out for extended periods
- Frozen vaccines
  - If possible, transfer to school freezer
  - Portable freezer unit
  - Do not allow to thaw

## Vaccine Monitoring On-Site

- Appoint one person to manage vaccine
- Must maintain a temperature range between 35° and 46°F (2° and 8°C)
- Record temperatures hourly

#### **Traffic Flow**

- Check In
- Screening
- Vaccine Stations
- Post-Vaccination Area Monitoring
- Check Out

#### **Vaccine Stations**

- Each vaccine at own station
  - Students move from station to station
  - Can get congested at vaccines needed more
- All vaccines at one station
  - Students don't have to move
  - Higher chance for administration errors

#### Staff Needed

- Administrative help for check in/out and traffic direction
- RNs/LPNs for screening and vaccinations
- RN Floater
  - Dedicated to responding to adverse events
  - Can fill in if vaccinator needs break

#### Vaccine Administration

- Make sure all vaccinators at clinic know proper administration
  - Using same location on every student
    - Tdap

      Left Arm, IM
    - MCV– Right Arm, IM
    - Varicella Right Arm, SC
- Vaccinator reviewing health screening
- Prefilling
- Lot number/Exp. Date
  - Pre-printed stickers

## **After the Shots**

CHIRP & Clinic Summary

#### Documentation

- CHIRP During clinic vs. After clinic
- MIM
- Updating school records

#### What worked? What didn't?

- Each clinic will teach you something new to be used at future clinics
- Get feedback from school
- Determine clinic success

#### Summary

- Work with your school
- Schedule a clinic date
- Determine clinic logistics
- Transport vaccine
- Implement clinic
- Get shots in arms!

Questions?

# Thank you!